PRKAG2 gene

protein kinase AMP-activated non-catalytic subunit gamma 2

Normal Function

The *PRKAG2* gene provides instructions for making one part (the gamma-2 subunit) of a larger enzyme called AMP-activated protein kinase (AMPK). This enzyme helps sense and respond to energy demands within cells. It is active in many different tissues, including heart (cardiac) muscle and muscles used for movement (skeletal muscles). AMP-activated protein kinase is likely involved in the development of the heart before birth, although its role in this process is unknown.

AMP-activated protein kinase regulates chemical pathways involving the cell's main energy source, a molecule called adenosine triphosphate (ATP). The breakdown of ATP releases energy to drive many types of chemical reactions. AMP-activated protein kinase is activated during times of cellular stress (such as low oxygen levels or muscle exercise), when ATP is broken down rapidly to produce energy. If ATP levels become too low, the enzyme restores the balance of energy by limiting chemical reactions that require ATP and stimulating pathways that generate ATP.

Studies suggest that AMP-activated protein kinase may play a role in controlling the activity of other genes, although many of these genes have not been identified. The enzyme may also regulate the activity of certain ion channels in the heart. These channels, which transport positively charged atoms (ions) into and out of heart muscle cells, play critical roles in maintaining the heart's normal rhythm.

Health Conditions Related to Genetic Changes

familial hypertrophic cardiomyopathy

Wolff-Parkinson-White syndrome

At least seven mutations that cause Wolff-Parkinson-White syndrome have been identified in the *PRKAG2* gene. Some people with these mutations also have features of hypertrophic cardiomyopathy, a form of heart disease that enlarges and weakens the heart (cardiac) muscle. Researchers are uncertain how *PRKAG2* mutations lead to the development of these heart conditions. Research suggests that these mutations alter the activity of AMP-activated protein kinase in the heart, disrupting the enzyme's ability to respond to changes in cellular energy demands. It is unclear, however, whether the genetic changes overactivate the enzyme or reduce its activity.

Studies indicate that changes in AMP-activated protein kinase activity allow a complex sugar called glycogen to build up abnormally within cardiac muscle cells. The accumulation of this substance enlarges these cells, which may lead to hypertrophic cardiomyopathy. Researchers continue to investigate whether an abnormal buildup of glycogen in the heart is also responsible for the problems with electrical signaling that are characteristic of Wolff-Parkinson-White syndrome.

Other studies have found that altered AMP-activated protein kinase activity is related to changes in the regulation of certain ion channels in the heart. These changes may help explain the increased risk of abnormal heart rhythms (arrhythmias) in people with Wolff-Parkinson-White syndrome.

other disorders

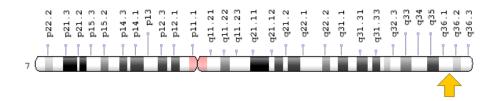
Several mutations in the *PRKAG2* gene have been found in people with other heart conditions. For example, a specific mutation in this gene is responsible for a very severe form of heart disease called lethal congenital glycogen storage disease of the heart. People with this mutation are born with extremely enlarged hearts (cardiomegaly) and abnormal electrical signaling within the heart. These abnormalities lead to respiratory distress and heart failure early in life. The mutation responsible for this condition changes a single protein building block (amino acid) in the gamma-2 subunit of AMP-activated protein kinase. Specifically, this mutation replaces the amino acid arginine with the amino acid glutamine at position 531 (written as Arg531Gln or R531Q). Studies suggest that this severe disorder may be related to the abnormal buildup of glycogen within cardiac muscle cells.

Other mutations in the *PRKAG2* gene have been associated with disorders affecting both cardiac and skeletal muscle. These mutations change single amino acids in the gamma-2 subunit of AMP-activated protein kinase. Individuals with these genetic changes typically experience muscle pain and stiffness, particularly following exercise, in addition to hypertrophic cardiomyopathy and abnormal electrical signaling within the heart. It is not known why the effects of some *PRKAG2* mutations appear to be confined to the heart, while other mutations cause signs and symptoms affecting both cardiac and skeletal muscles.

Chromosomal Location

Cytogenetic Location: 7q36.1, which is the long (q) arm of chromosome 7 at position 36.1

Molecular Location: base pairs 151,556,114 to 151,877,231 on chromosome 7 (Homo sapiens Annotation Release 108, GRCh38.p7) (NCBI)



Credit: Genome Decoration Page/NCBI

Other Names for This Gene

- AAKG
- AAKG2
- AAKG2_HUMAN
- AMP-activated protein kinase gamma2 subunit
- AMPK gamma2
- CMH6
- H91620p
- protein kinase, AMP-activated, gamma 2 non-catalytic subunit
- WPWS

Additional Information & Resources

Scientific Articles on PubMed

PubMed

https://www.ncbi.nlm.nih.gov/pubmed?term=%28%28PRKAG2%5BTIAB%5D%29+OR+%28AMPK%5BTI%5D%29+OR+%28AMP-activated+protein+kinase%5BTI%5D%29%29+OR+%28%28AAKG%5BTIAB%5D%29+OR+%28AAKG2%5BTIAB%5D%29+OR+%28AMP-activated+protein+kinase+gamma2+subunit%5BTIAB%5D%29+OR+%28AMPK+gamma2%5BTIAB%5D%29+OR+%28CMH6%5BTIAB%5D%29+OR+%28H91620p%5BTIAB%5D%29+OR+%28WPWS%5BTIAB%5D%29+AND+%28%28Genes%5BMH%5D%29+OR+%28Genetic+Phenomena%5BMH%5D%29%29+AND+english%5Bla%5D+AND+human%5Bmh%5D+AND+%22last+1800+days%22%5Bdp%5D

OMIM

- GLYCOGEN STORAGE DISEASE OF HEART, LETHAL CONGENITAL http://omim.org/entry/261740
- PROTEIN KINASE, AMP-ACTIVATED, NONCATALYTIC, GAMMA-2 http://omim.org/entry/602743

Research Resources

- Atlas of Genetics and Cytogenetics in Oncology and Haematology http://atlasgeneticsoncology.org/Genes/GC_PRKAG2.html
- ClinVar https://www.ncbi.nlm.nih.gov/clinvar?term=PRKAG2%5Bgene%5D
- HGNC Gene Symbol Report http://www.genenames.org/cgi-bin/gene_symbol_report?q=data/ hqnc data.php&hqnc id=9386
- NCBI Gene https://www.ncbi.nlm.nih.gov/gene/51422
- UniProt http://www.uniprot.org/uniprot/Q9UGJ0

Sources for This Summary

- Ahmad F, Arad M, Musi N, He H, Wolf C, Branco D, Perez-Atayde AR, Stapleton D, Bali D, Xing Y, Tian R, Goodyear LJ, Berul CI, Ingwall JS, Seidman CE, Seidman JG. Increased alpha2 subunitassociated AMPK activity and PRKAG2 cardiomyopathy. Circulation. 2005 Nov 15;112(20):3140-8. Epub 2005 Nov 7.
 - Citation on PubMed: https://www.ncbi.nlm.nih.gov/pubmed/16275868
- Burwinkel B, Scott JW, Bührer C, van Landeghem FK, Cox GF, Wilson CJ, Grahame Hardie D, Kilimann MW. Fatal congenital heart glycogenosis caused by a recurrent activating R531Q mutation in the gamma 2-subunit of AMP-activated protein kinase (PRKAG2), not by phosphorylase kinase deficiency. Am J Hum Genet. 2005 Jun;76(6):1034-49. Epub 2005 May 2. Citation on PubMed: https://www.ncbi.nlm.nih.gov/pubmed/15877279
 Free article on PubMed Central: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1196441/
- Daniel T, Carling D. Functional analysis of mutations in the gamma 2 subunit of AMP-activated protein kinase associated with cardiac hypertrophy and Wolff-Parkinson-White syndrome. J Biol Chem. 2002 Dec 27;277(52):51017-24. Epub 2002 Oct 22.
 Citation on PubMed: https://www.ncbi.nlm.nih.gov/pubmed/12397075
- Gollob MH, Green MS, Tang AS, Gollob T, Karibe A, Ali Hassan AS, Ahmad F, Lozado R, Shah G, Fananapazir L, Bachinski LL, Roberts R. Identification of a gene responsible for familial Wolff-Parkinson-White syndrome. N Engl J Med. 2001 Jun 14;344(24):1823-31. Erratum in: N Engl J Med 2001 Aug 16;345(7):552. Hassan AS [corrected to Ali Hassan AS]. N Engl J Med 2002 Jan 24; 346(4):300.
 - Citation on PubMed: https://www.ncbi.nlm.nih.gov/pubmed/11407343
- Gollob MH, Green MS, Tang AS, Roberts R. PRKAG2 cardiac syndrome: familial ventricular preexcitation, conduction system disease, and cardiac hypertrophy. Curr Opin Cardiol. 2002 May; 17(3):229-34. Review.
 - Citation on PubMed: https://www.ncbi.nlm.nih.gov/pubmed/12015471
- Gollob MH, Seger JJ, Gollob TN, Tapscott T, Gonzales O, Bachinski L, Roberts R. Novel PRKAG2
 mutation responsible for the genetic syndrome of ventricular preexcitation and conduction system
 disease with childhood onset and absence of cardiac hypertrophy. Circulation. 2001 Dec 18;
 104(25):3030-3.
 - Citation on PubMed: https://www.ncbi.nlm.nih.gov/pubmed/11748095
- Hardie DG, Sakamoto K. AMPK: a key sensor of fuel and energy status in skeletal muscle. Physiology (Bethesda). 2006 Feb;21:48-60. Review.
 Citation on PubMed: https://www.ncbi.nlm.nih.gov/pubmed/16443822
- Laforêt P, Richard P, Said MA, Romero NB, Lacene E, Leroy JP, Baussan C, Hogrel JY, Lavergne T, Wahbi K, Hainque B, Duboc D. A new mutation in PRKAG2 gene causing hypertrophic cardiomyopathy with conduction system disease and muscular glycogenosis. Neuromuscul Disord. 2006 Mar;16(3):178-82. Epub 2006 Feb 17.
 Citation on PubMed: https://www.ncbi.nlm.nih.gov/pubmed/16487706
- Murphy RT, Mogensen J, McGarry K, Bahl A, Evans A, Osman E, Syrris P, Gorman G, Farrell M, Holton JL, Hanna MG, Hughes S, Elliott PM, Macrae CA, McKenna WJ. Adenosine monophosphate-activated protein kinase disease mimicks hypertrophic cardiomyopathy and Wolff-Parkinson-White syndrome: natural history. J Am Coll Cardiol. 2005 Mar 15;45(6):922-30. Citation on PubMed: https://www.ncbi.nlm.nih.gov/pubmed/15766830

- Oliveira SM, Ehtisham J, Redwood CS, Ostman-Smith I, Blair EM, Watkins H. Mutation analysis
 of AMP-activated protein kinase subunits in inherited cardiomyopathies: implications for kinase
 function and disease pathogenesis. J Mol Cell Cardiol. 2003 Oct;35(10):1251-5.
 Citation on PubMed: https://www.ncbi.nlm.nih.gov/pubmed/14519435
- Sternick EB, Oliva A, Magalhães LP, Gerken LM, Hong K, Santana O, Brugada P, Brugada J, Brugada R. Familial pseudo-Wolff-Parkinson-White syndrome. J Cardiovasc Electrophysiol. 2006 Jul;17(7):724-32.
 Citation on PubMed: https://www.ncbi.nlm.nih.gov/pubmed/16836667

Reprinted from Genetics Home Reference: https://ghr.nlm.nih.gov/gene/PRKAG2

Reviewed: February 2007 Published: March 21, 2017

Lister Hill National Center for Biomedical Communications U.S. National Library of Medicine National Institutes of Health Department of Health & Human Services